County: Ashl and ASHLAND HEALTH/REHAB CENTER 1319 BEASER AVENUE

Ownership: Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Average Daily Census: 92

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Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/0	00) %				
Home Health Care Supp. Home Care-Personal Care Supp. Home Care-Household Services Day Services Respite Care Adult Day Care Adult Day Health Care	No No No No Yes No No	Primary Diagnosis Developmental Disabilities Mental Illness (Org./Psy) Mental Illness (Other) Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic	0. 0 23. 0 10. 3 0. 0 2. 3	Age Groups	1. 1 10. 3 40. 2 39. 1 9. 2	Less Than 1 Year 1 - 4 Years More Than 4 Years ***********************************	
Home Delivered Meals	No	Fractures	6. 9	65 & Over	100. 0	Nursing Staff per 100 (12/31/00)	Resi dents
Transportation Referral Service Other Services	No No Yes	Cerebrovascul ar Di abetes Respi ratory	13. 8 1. 1 0. 0	Sex	 %	RNs LPNs Nursing Assistants	11. 4 8. 8
Provi de Day Programming for Mentally Ill Provi de Day Programming for Developmentally Disabled	No No	Other Medical Conditions	17. 2 100. 0	Male Female	27. 6 72. 4 100. 0	Aides & Orderlies	37. 6
Supp. Home Care-Personal Care Supp. Home Care-Household Services Day Services Respite Care Adult Day Care Adult Day Health Care Congregate Meals Home Delivered Meals Other Meals Transportation Referral Service Other Services Provide Day Programming for Mentally Ill Provide Day Programming for	No No No Yes No No No No No No Yes	Developmental Disabilities Mental Illness (Org./Psy) Mental Illness (Other) Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic Cancer Fractures Cardiovascular Cerebrovascular Diabetes	0. 0 23. 0 10. 3 0. 0 2. 3 0. 0 6. 9 25. 3 13. 8 1. 1 0. 0	Under 65 65 - 74 75 - 84 85 - 94 95 & Over 65 & Over Sex	10. 3 40. 2 39. 1 9. 2 100. 0 98. 9 	1 - 4 Years More Than 4 Years ****************************** Full-Time Equival Nursing Staff per 100 (12/31/00) RNs LPNs	42. 5 21. 8 100. 0 **********************************

Method of Reimbursement

	Medicare (Title 18)			(Medicaid (Title 19)			Other Private			rivate			Manageo			Percent
			Per Die	m		Per Die	m		Per Die	m		Per Diem	l	I	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	2	17 6	\$302. 95	2	5. 1	\$92. 39	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	6	6. 9%
	14			- 3			-			•			ŭ				
Skilled Care	14	82. 4	\$289. 27	54	91. 5	\$79. 73	0	0. 0	\$0. 00	11		\$135.64	U	0.0	\$0. 00	79	90. 8%
Intermedi ate				2	3.4	\$67. 07	0	0. 0	\$0. 00	0	0. 0	\$0. 00	0	0. 0	\$0. 00	2	2. 3%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj	. 0	0.0	\$0. 00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0%
Ventilator-Depender	t 0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0%
Total	17	100.0		59 1	100. 0		0	0.0		11	100.0		0	0.0		87	100.0%

Admissions, Discharges, and Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Deaths During Reporting Period % Needi ng Total Assistance of Activities of Percent Admissions from: % Totally Number of Independent Private Home/No Home Health 3.3 Daily Living (ADL) One Or Two Staff Dependent Resi dents 69. 0 78. 2 Private Home/With Home Health 7.6 Baťhi ng 8.0 23. 0 87 Other Nursing Homes 1.4 **Dressing** 10.3 11.5 87 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Transferring 25.3 57. 5 87 83. 9 17. 2 87 3.8 Toilet Use 17. 2 66. 7 16. 1 0.0 Eating 25. 3 69. 0 5. 7 87 Other Locations ***** 0.0 Total Number of Admissions Continence Special Treatments 211 Receiving Respiratory Care
Receiving Tracheostomy Care
Receiving Suctioning
Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 3. 4 3.4 Private Home/No Home Health 9.6 Occ/Freq. Incontinent of Bladder 33. 3 0.0 Private Home/With Home Health 28.0 Occ/Freq. Incontinent of Bowel 32. 2 0.0 Other Nursing Homes 8. 7 0.0 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 28.0 Mobility 0.0 Physically Restrained 5.7 3. 2 29.9 0.0 Other Locations 3. 2 Skin Care Other Resident Characteristics 4.6 Deaths 19.3 With Pressure Sores Have Advance Directives 100.0 Total Number of Discharges With Rashes Medi cati ons 1. 1 Receiving Psychoactive Drugs (Including Deaths) 218

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

		0wne	ershi p:	Bed	Si ze:	Li ce	ensure:		
	Thi s	Proj	ori etary	100- 199		Skilled		Al l	
	Facility	Peer	Group	Peer	Group	Peer Group		Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	76. 0	80. 4	0. 95	82. 6	0. 92	84. 1	0. 90	84. 5	0. 90
Current Residents from In-County	66. 7	74. 2	0. 90	79. 7	0.84	76. 2	0. 88	77. 5	0.86
Admissions from In-County, Still Residing	7. 1	19. 0	0. 37	22. 3	0. 32	22. 2	0. 32	21. 5	0. 33
Admissions/Average Daily Census	229. 3	135. 3	1. 70	126. 4	1.81	112. 3	2.04	124. 3	1.85
Discharges/Average Daily Census	237. 0	137. 7	1. 72	127. 9	1.85	112. 8	2. 10	126. 1	1.88
Discharges To Private Residence/Average Daily Census	89. 1	57. 0	1. 56	52. 7	1. 69	44. 1	2. 02	49. 9	1. 79
Residents Receiving Skilled Care	97. 7	89. 4	1. 09	89. 2	1. 10	89. 6	1. 09	83. 3	1. 17
Residents Aged 65 and Older	98. 9	95. 9	1.03	95. 1	1.04	94. 3	1.05	87. 7	1. 13
Title 19 (Médicaid) Funded Residents	67. 8	71.6	0. 95	70. 7	0. 96	70. 1	0. 97	69. 0	0. 98
Private Pay Funded Residents	12. 6	19. 0	0. 67	19. 5	0. 65	21. 4	0. 59	22. 6	0. 56
Developmentally Disabled Residents	0. 0	1. 2	0.00	0. 9	0.00	0. 9	0.00	7. 6	0.00
Mentally Ill Résidents	33. 3	35. 9	0. 93	36. 3	0. 92	39. 6	0.84	33. 3	1.00
General Medical Service Residents	17. 2	18. 2	0. 95	19. 1	0. 90	17. 0	1. 01	18. 4	0. 94
Impaired ADL (Mean)	48. 7	47. 3	1.03	48. 4	1. 01	48. 2	1.01	49. 4	0. 99
Psychological Problems	36. 8	45.0	0. 82	49. 3	0. 75	50.8	0. 72	50. 1	0. 73
Nursing Care Required (Mean)	4. 9	6. 7	0. 73	6. 5	0. 75	6. 7	0. 73	7. 2	0. 68